

# FORM LM-30

## LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

AUG 17 2005

1. File Number U - <u>11525</u>	2. Fiscal Year Covered From: <u>1</u> / <u>1</u> / <u>2004</u> Through: <u>12</u> / <u>31</u> / <u>2004</u>
3. Name and address of person filing. Name <u>Joseph</u> <u>F</u> <u>Abdoo</u>  P.O. Box, Bldg., Room No., if any <u></u> Street <u>1358 Abbott Street</u> City <u>Detroit</u> State <u>Michigan</u> ZIP Code + 4 <u>48226-2460</u>	4. Name, file number, and address of labor organization. Name <u>Int'l. Brotherhood of Elec Workers, LU 58</u> Labor Organization File Number <u>024-247</u>  P.O. Box, Building and Room Number, if any <u>PO Box 32756</u> Street <u></u> City <u>Detroit</u> State <u>Michigan</u> ZIP Code + 4 <u>48232-0756</u>
5. Position in labor organization. <u>President/Organizer</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name <u>Motor City Electric Company</u>  Trade Name, if any: <u></u>  P.O. Box, Bldg., Room No., if any <u></u> Street <u>5440 Grinnell Street</u> City <u>Detroit</u> State <u>Michigan</u> ZIP Code + 4 <u>48213</u>	7.a. Nature of Interest, Transaction, or Income. <u>3/3/04 - Business Meeting - Red Wings game</u> <u>12/20/04 - gift certificate for a ham</u>  7.b. Amount. <u>\$110</u>

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed



On

6/29/05

Date

(313) 408-5893

Telephone Number

Name of Person Filing <b>Joseph Abdoo</b>	File Number U-
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**B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.**

<p><b>8. Name and address of Business (including trade name, if any).</b></p> <p>Name <input style="width: 80%;" type="text"/></p> <p>Trade Name, if any: <input style="width: 80%;" type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input style="width: 80%;" type="text"/></p> <p>Street <input style="width: 80%;" type="text"/></p> <p>City <input style="width: 80%;" type="text"/></p> <p>State <input style="width: 20%;" type="text"/> ZIP Code + 4 <input style="width: 20%;" type="text"/></p>	<p><b>9. Business deals with:</b></p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p><b>10. If 9.b. or 9.c. is checked give trust or employer's name.</b></p> <p>Name <input style="width: 80%;" type="text"/></p> <p>Trade Name, if any: <input style="width: 80%;" type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input style="width: 80%;" type="text"/></p> <p>Street <input style="width: 80%;" type="text"/></p> <p>City <input style="width: 80%;" type="text"/></p> <p>State <input style="width: 20%;" type="text"/> ZIP Code + 4 <input style="width: 20%;" type="text"/></p>	<p><b>11.a. Nature of such dealing.</b></p> <div style="border: 1px solid black; height: 80px; width: 100%;"></div> <p><b>11.b. Approximate dollar value of such dealing.</b> <input style="width: 100%;" type="text"/></p> <p><b>12.a. Nature of interest held or income received.</b></p> <div style="border: 1px solid black; height: 100px; width: 100%;"></div> <p><b>12.b. Amount.</b> <input style="width: 100%;" type="text"/></p>

**C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.**

<p><b>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</b></p> <p>Name <input style="width: 80%;" type="text" value="Cranbrook Institute of Science"/></p> <p>Trade Name, if any: <input style="width: 80%;" type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input style="width: 80%;" type="text" value="PO Box 801"/></p> <p>Street <input style="width: 80%;" type="text" value="39221 Woodward Avenue"/></p> <p>City <input style="width: 80%;" type="text" value="Bloomfield Hills"/></p> <p>State <input style="width: 20%;" type="text" value="Michigan"/> ZIP Code + 4 <input style="width: 20%;" type="text" value="48303-0801"/></p>	<p><b>14.a. Nature of payment.</b></p> <div style="border: 1px solid black; padding: 5px;"> <p>12/6/04 - Business Meeting - breakfast provided</p> </div>
<p><b>13.b. Is the Business an Employer</b> <input type="checkbox"/> <b>or Consultant</b> <input checked="" type="checkbox"/> <b>?</b></p>	<p><b>14.b. Amount of payment.</b> <input style="width: 100%;" type="text" value="\$8"/></p>

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## Part C Continuation Page

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Bank One

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 611 Woodward Avenue

City Detroit

State Michigan

ZIP Code + 4 48226

14.a. Nature of payment.

2/3/04 - Business Meeting - Piston's game

13.b. Is the Business an Employer ☐ or Consultant ☒ ?

14.b. Amount of payment.

\$100

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Greater Media Detroit

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street One Radio Plaza

City Ferndale

State Michigan

ZIP Code + 4 48220

14.a. Nature of payment.

2/18/04 - Business Meeting - lunch provided  
10/14/04 - Business Meeting - breakfast provided  
12/9/04 - Business Meeting - breakfast provided  
12/14/04 - Business Meeting - lunch provided

13.b. Is the Business an Employer ☐ or Consultant ☒ ?

14.b. Amount of payment.

\$75

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Loomis Sayles

Trade Name, if any:

P.O. Box, Bldg., Room No., if any 7247-6804

Street

City Philadelphia

State Pennsylvania

ZIP Code + 4 19170

14.a. Nature of payment.

11/29/04 - Business Meeting - lunch provided

13.b. Is the Business an Employer ☐ or Consultant ☒ ?

14.b. Amount of payment.

\$25

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## Part C Continuation Page

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Morgan Stanley - Dean Witter

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 220 Park Street, Suite 220

City Birmingham

State Michigan ZIP Code + 4 48009

14.a. Nature of payment.

3/30/04 - Business Meeting - dinner provided  
8/4/04 - Business Meeting - lunch provided  
11/15/04 - Business Meeting - lunch provided  
12/20/04 - Received a globe13.b. Is the Business an Employer ☐ or Consultant ☒ ?

14.b. Amount of payment.

\$117

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Radian Capital

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street One Federal Street

City Boston

State Massachusetts ZIP Code + 4 02110

14.a. Nature of payment.

12/10/04 - Business meeting - lunch provided

13.b. Is the Business an Employer ☐ or Consultant ☒ ?

14.b. Amount of payment.

\$20

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Radio Free Michigan

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 1878 Q Lake

City Clark Lake

State Michigan ZIP Code + 4 49234

14.a. Nature of payment.

6/16/04 - Business Meeting - dinner provided

13.b. Is the Business an Employer ☐ or Consultant ☒ ?

14.b. Amount of payment.

\$30

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## Part C Continuation Page

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Blue Cross - Blue Shield

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 27000 West 11 Mile Road

City Southfield

State Michigan

ZIP Code + 4 48034

14.a. Nature of payment.

12/28/04 - Business Meeting - Piston's game

13.b. Is the Business an Employer ☐ or Consultant ☐ ?

14.b. Amount of payment.

\$160

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Roncelli, Inc.

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 35777 VanDyke Avenue

City Sterling Heights

State Michigan

ZIP Code + 4 49312

14.a. Nature of payment.

Received a turkey

13.b. Is the Business an Employer ☐ or Consultant ☐ ?

14.b. Amount of payment.

\$20

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

14.a. Nature of payment.

13.b. Is the Business an Employer ☐ or Consultant ☐ ?

14.b. Amount of payment.

Name of Person Filing Joseph Abdoo

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## Part A Continuation Page

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

## 6. Name and address of Employer (including trade name if any).

Name Sachs/McGraw Electric

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 12210 Merriman Road

City Livonia

State Michigan

ZIP Code + 4 48150

## 7.a. Nature of Interest, Transaction, or Income.

2/23/04 - Business Meeting - lunch provided

## 7.b. Amount.

\$12

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

## 6. Name and address of Employer (including trade name if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

## 7.a. Nature of Interest, Transaction, or Income.

## 7.b. Amount.

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

## 6. Name and address of Employer (including trade name if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

## 7.a. Nature of Interest, Transaction, or Income.

## 7.b. Amount.